									Application or Docket Number							
	PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2003									RD 10 723,814						
		Elleci		1	0 1 72	231	814									
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OR	OTHER THAN SMALL ENTITY				
TOTAL CLAIMS 24								RAT	E	FEE	7	RATE	FEE			
FOR			NUMBER FILED		NUMBER EXTRA			BASIC	FEE	385.00	OR	BASIC FEE	770,00			
TOTAL CHARGEABLE CLAIMS			24 minus 20=		* 4			X\$ 9=			OR	X\$18=	72			
INDEPENDENT CLAIMS			3 minus 3 =		* Ø			X43=			OR	X86=	16			
ML	ILTIPLE DEPEN	NDENT CLAIM PI	RESENT	-				+145=			1	+290=				
* If	the difference	in column 1 is	less than zero, enter "0"			column 2					OR					
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTA	٨L		OR	TOTAL	847			
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMAI	LL 8	ENTITY	OR	OTHER SMALL I				
		CLAIMS		HIGH	ــــــــــــــــــــــــــــــــــــــ	(Column 5)	1 [ADDI-	7		ADDI-			
AMENDMENT A		REMAINING AFTER AMENDMENT		PREVICE PAID	USLY	PRESENT EXTRA		RATE	Ξ.	TIONAL		RATE	TIONAL FEE			
	Total	*	Minus	**		=		X\$ 9:	=		OR	X\$18=				
ME	Independent	*	Minus	***		=		X43=	=		OR	X86=				
_	FIRST PRESE	NTATION OF MU	JLTIPLE DE	PENDENT	CLAIM		ŀ	4.45			1	. 200				
1, 9,17							Ĺ	+145:			OR	+290= TOTAL				
								TOT ADDIT. F			OR	ADDIT. FEE				
	(Column 1) (Column 2) (Column 3)															
NDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIC PAID I	BER OUSLY	PRESENT EXTRA		RATE	-	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE			
	Total	*	Minus	**		= ,,_		X\$ 9=	-		OR	X\$18=				
AMEND	Independent	*	Minus	***		=	!	X43=		-	OR	X86=				
٩	FIRST PRESE	ILTIPLE DEF	PENDENT	CLAIM		┇╞		-		On						
							L	+145=	i		OR	+290=				
	•						Δ	TOT. ADDIT. FE			OR	TOTAL ADDIT. FEE				
(Column 1) (Column 2) (Column 3)										•						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER JUSLY	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE			
ΜQ	Total	*	Minus	**		=		X\$ 9=			OR	X\$18=				
ME	Independent	*	Minus	***		= .	╽┟	X43=	┪			X86=				
٧	FIRST PRESE	NTATION OF MU	ILTIPLE DEF	PENDENT	CLAIM		┞	740-	+		OR	700=				
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+290=					
** 1	f the "Highest Nur	mber Previously Pa	id For IN THI	S SPACE is	less that	n 20, enter "20."	A	TOTA DDIT. FE		·	OR ,	TOTAL ADDIT. FEE				
		mber Previously Pa ber Previously Paid								ropriate box	in col	umn 1.				